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	Filing Date	
	First Named Inventor	Anders JONSSON
	Title	CORRUGATED PRODUCT
	Art Unit	
	Examiner Name	
Attorney Docket Number		

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SIGNATURE of Applicant or Assignee of Record (If assignee, put name, title and company name in the "Name" space below)

Name	Anders Jonsson, M.D. Wellpoint AB		
Signature			
Date	09/08/2005	Telephone	+46-431-431 444

NOTE: Signatures of all the inventors or assignees of record of the entire interest or their representative(s) are required. Submit multiple forms if more than one signature is required, see below*.

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